

ORDER FOR SUPPLIES OR SERVICES

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

BPA NO.

1. DATE OF ORDER MAR 03 2008		2. CONTRACT NO. (if any) NRC-42-07-483		6. SHIP TO:	
3. ORDER NO. 0005		MODIFICATION NO.		a. NAME OF CONSIGNEE U.S. Nuclear Regulatory Commission, NRO	
5. ISSUING OFFICE (Address correspondence to) U.S. Nuclear Regulatory Commission Div. of Contracts Attn: Kala Shankar Mail Stop T-7-I-2 Washington, DC 20555		4. REQUISITION/REFERENCE NO. NRC-42-07-483 (05)		b. STREET ADDRESS Attn: Vincent Klco	
7. TO:		c. CITY Washington		d. STATE DC	e. ZIP CODE 20555
a. NAME OF CONTRACTOR ENERGY RESEARCH INC		f. SHIP VIA		8. TYPE OF ORDER	
b. COMPANY NAME		<input type="checkbox"/> a. PURCHASE		<input checked="" type="checkbox"/> b. DELIVERY	
c. STREET ADDRESS 6167 EXECUTIVE BLVD		REFERENCE YOUR Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.		Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY ROCKVILLE	e. STATE MD	f. ZIP CODE 208523901			
9. ACCOUNTING AND APPROPRIATION DATA 825-15-171-107, JC: Q-4027; BOC 252A; 31X0200.825 Obligate: \$65,513.76 CONTRACTOR DUNS: 621211259		10. REQUISITIONING OFFICE NRO			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))				12. F.O.B. POINT N/A	
<input checked="" type="checkbox"/> a. SMALL		<input type="checkbox"/> b. OTHER THAN SMALL		<input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED	
<input type="checkbox"/> d. WOMEN-OWNED		<input type="checkbox"/> e. HUBZone		<input type="checkbox"/> f. EMERGING SMALL BUSINESS	
13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)	
a. INSPECTION	b. ACCEPTANCE			16. DISCOUNT TERMS Net 30	

17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	Issuance of Task Order No.5, under Contract No. NRC-42-07-483 Title: "Technical Assistance in Conducting Orientation for prospective team members" Period of Performance: 03/03/08 - 03/02/10 Estimated Reimbursable Cost: \$62,394.06 Fixed Fee: \$3,119.70 Total Cost plus Fixed Fee: \$65,513.76 Funding in the amount of \$65,513.76 is being provided. See attached pages for a description of Task Order 05.					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOTAL (Cont. pages) 17(i). GRAND TOTAL
	21. MAIL INVOICE TO:						
	a. NAME U.S. Nuclear Regulatory Commission Payment Team, Mail Stop T-9-H-4						
	b. STREET ADDRESS (or P.O. Box) Attn: (NRC-42-07-483 Task Order No. 5)						
	c. CITY Washington	d. STATE DC	e. ZIP CODE 20555		\$65,513.76		
22. UNITED STATES OF AMERICA BY (Signature) <i>Kala Shankar</i>					23. NAME (Typed) Kala Shankar Contracting Officer TITLE: CONTRACTING/ORDERING OFFICER		

In accordance with Section G.4, Task Order Procedures, of Contract No. NRC-42-07-483, this definitizes Task Order No. 05. The effort shall be performed in accordance with the attached Statement of Work.

Task Order No. 05 shall be in effect from March 3, 2008 through March 2, 2010, with a cost ceiling of \$65,513.76. The amount of \$62,394.06 represents the estimated reimbursable costs, and the amount of \$3,119.70 represents the fixed fee.

The amount obligated by the Government with respect to this task order is \$65,513.76, of which \$62,394.06 represents the estimated reimbursable costs, and the amount of \$3,119.70 represents the fixed fee.

The issuance of this task order does not amend any terms or conditions of the subject contract.

Your contacts during the course of this task order are:

Technical Matter: Karen Chapman
Project Officer
301-415-3653

Contractual Matters: Kala Shankar
Contract Specialist
301-415-6310

Acceptance of Task Order No. 05 should be made by having an official, authorized to bind your organization, execute three copies of this document in the space provided and return two copies to the Contract Specialist at the address identified in Block No. 5 of the OF 347. You should retain the third copy for your records.

ACCEPTANCE:

John K...-R...
NAME

President
TITLE

March 3, 2008
DATE